PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<u> </u>	nder the Paperw PA1	ork Reduction Act FENT APPLI		N FEE DELI	ERWINALIC	to a collection of Ir	rademark Off formation unte	ice; U.S. ( ass it display Applica	DEPARTMENT ( Bys a valid OMB Ition or Dooket N	of COMMERC control number
Substitute for Form PTO-875 09/9987										
_			LAIMS AS FILED - PART I (Column 1) (C			olumn 2) SMALL ENTITY		OR -	OTHER THAN SMALL ENTITY	
BAS	FOR :	NUME	NUMBER FILED		BER EXTRA	RATE	FEE	l	RATE	FEE
(37	CFR 1.16(e))		•				•	OR	12.11	\$
(37	CFR 1.16(c))		minus 20 ≈			X \$ =		1		<u>'</u>
.IND (37	EPENDENT CLAI CFR 1.16(b))	MS	minus 3 =		-	X \$ =	<del>                                     </del>	OR	× \$=	<del> </del>
MU	TIPLE DEPENDE	NT CLAIM PRESE	AIM PRESENT (37 CFR				<del> </del>	OR	× \$=	ļ
					+\$	<u> </u>	OR	+ \$=		
	* If the difference in column 1 is less than zero, enter "0" in column 2.						L	OR	TOTAL	
CLAIMS AS AMENDED - PART II										
4	12/06	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHER	RTHAN
*		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-			ENTITY
		AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		TIONAL		RATE	ADDI- TIONAL
AMENDMENT	Total (37 CFR 1.16(c))	1.13	Minus	" 25	=	X \$_ =	/FEE		/	FEE
JEN	Independent (37 CFR 1.16(b))	/	Minus	<b>"</b> 3	=/-	x : =	<b>/</b>	OR	× • _ =	
₹	FIRST PRESENT	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 C	FR 1.16(d))	/		OR	×*=	
						TOTAL		OR	TOTAL	
		(0-1				ADD'L FEE		OR	ADD'L FEE	
В		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)					
		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI-		RATE	ADDI-
É	Total	AMENDMENT •	Minus	PAID FOR			TIONAL FEE			TIONAL FEE
9	(37 CFR 1.16(c)) Independent	•	Minus	***	=	X \$=		OR	X \$=	
<b>AMENDMENT</b>	(37 CFR 1.16(b))			-	=	X \$=		OR	X \$ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+	,	OR	+\$ =-	
						TOTAL ADD'L FEE		OR	TOTAL	<del></del>
		(Column 1)		(Column 2)	(Column 3)			OK	ADD'L FEE	
ပ		CLAIMS REMAINING		HIGHEST	PRESENT		<u>-</u>	1	<del></del>	
뉡		AFTER AMENDMENT	·	NUMBER PREVIOUSLY PAID FOR	EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Ž	Total (37 OFR 1.16(c))	•	Minus	**	=		FEE	- 1		FEE
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	X \$=	<del></del> -	OR	X \$=	
₹	FIRST PRESENT	ATION OF MULTIPLE	DEPENDS	NT CLAIM (97.00	P 4 40(4)	X \$=	· · · · · · · · · · · · · · · · · · ·	OR	X \$=	
			·	AT OLDAM (37 CF	+ \$ =		OR	+ \$ =		
•	If the entry in $\infty$	Olumn 1 is less the	n the entr	in column a	0 101 la seleme e	ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less then the entry in column 2, write "0" in column 3.      If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".      The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retein a benefit by the public which is to file (end by the USPTO to process) en application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Depertment of Commerce, P.O. Box 1450, Alexandrie, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.